

# KANAKA LGBTQIA+ & MĀHŪ TOOLKIT

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# NO KA MĀHŪI

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Bridging the gap between healthcare professionals  
and those who walk between two worlds

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Papa Ola Lokahi  
Nana I Ka Pono Na Ma

## NATIVE IDENTITY

While the mnemonic LGBTQIA+ is most widely associated with sexual and gender minorities, it does not fully capture the complexities of how sexuality and gender intersect with culture, community, and spirituality. Especially for the Indigenous peoples of the Pacific Islands, the term LGBTQIA+ can serve to perpetuate the already ongoing harms of colonization. It is a mnemonic that is foreign, not self-subscribed, and devoid of the richness of what it means to be Pasifika or a Pacific Islander.

Māhū in Hawaiian culture describes someone who embodies both *kāne* (man) and *wahine* (woman) energies. They were cherished, adored, and they played important roles in society as healers, caretakers, and *kumu* (teachers). Hawaiians did not care about gender and sexual identities the way we do today. What was valued was the individual's contribution to their community. The rather clinical definition of māhū in the Hawaiian Dictionary by Mary Kawena Puku'i and Samuel Elbert describes them as "a homosexual of either sex, hermaphrodite."

The word now elicits a range of responses since it had been derogated over time. What was once used to describe someone's divinity was now used as a slur to perpetuate homophobia and transphobia starting in the mid-1900s. It seemed that as the Hawaiian Sovereignty movement grew, so did a sense of



determination around the *kanaka maoli* (native person or Native Hawaiian) identity, including a desire to decolonize the sexual and gender identity. That determination around Hawaiian sexual and gender identity could not have happened without māhū reclaiming the word, the people, and their *kuleana* (honor, responsibility) in the family unit, social circles, and the community. Māhū can be interpreted exactly as Puku'i and Elbert laid down on paper, but it leaves no room for the nuanced experiences of those who identify as māhū. To many contemporaries, any Native Hawaiian who is homosexual, transgender, gender non-conforming, gender non-binary is a gender and/or sexual minority is māhū.



Coined by Niuean activist Phylesha Brown-Acton, the mnemonic **MVPFAFF+** was born out of this desire to decolonize gender and sexuality by centering Pasifika diversity and language. The mnemonic stands for: **Māhū** (Tahiti and Hawai'i), **Vaka sa lewa** (Fiji), **Palopa** (Papua New Guinea); **Fa'afafine** (Samoa and Tokelau), **Akava'ine** (Cook Islands); **Fakaleiti** (Tonga), **Fakafifine** (Niue). These terms are not just a narrow reflection of gender or sexuality, but rather broader and more fluid concepts rooted in familial and community relationships, storytelling, ancestors, responsibility, and culture.



## IDENTITY INTERSECTIONALITY & HEALTHCARE



Associate professor of Health Policy at Weill Cornell Medical College, Dr. Dhruv Kullar wrote, “lesbian, gay, bisexual, and transgender [LGBTQIA+ and T] individuals experience a range of social, economic and health disparities – often the result of a culture and of laws and policies that treat them as lesser human beings,” He went on to list more challenges that LGBTQIA+ and Trans folks on the continental United States face.

Interestingly, many of those challenges were also identified in the State of Hawai'i Department of Health's 2018 Sexual and Gender Minority Report, such as increased suicidal ideations, smoking, substance use, and physical abuse. Another often overlooked challenge that (LGBT) folks experience is discrimination in healthcare. One of the most critical challenges LGBTQIA+ and Trans individuals endure is talking about their sexual health with their PCP if they have one at all. **It is imperative to educate healthcare professionals on the differences in care needs and to understand that ignoring them is only detrimental to providing quality, effective care.**

Black LGBTQIA+ people experience higher levels of discrimination, economic difficulty, and negative mental and physical health outcomes in contrast to their White counterparts. To know why is to acknowledge and understand



the historical and ongoing factors that force their sexual and gender identity to interact with their racial identity. **The history of colonization and the prevailing oppressive systems in Hawai'i are the intimately interwoven, contextual factors that shape a Native Hawaiian LGBTQIA+ and/or māhū person's lived experiences.**

## HISTORY

For māhū, history has been wrought with the violence that came with Christianity and Western discourses on sexuality and gender. Through evangelical projects, Kanaka Maoli social and religious structures that supported complex family systems collapsed. Kanaka Maoli were encouraged to marry and engage in hetero-normative relations under the Calvinist, Catholic, and Mormon sects of Christianity, thus alienating all forms of human relation and kinship that were contrary to the strict moral codes of the churches. One document from Reverend Cochran Forbes' 1838 journal reads:

“One man who has never dressed in male clothing from birth now labours under conviction. He appears truly humbled but says he does not know how to change his dress. I told him that if he would be a follower of Jesus, he must make no reserve but must be willing to sacrifice everything. Poor fellow HE HAS A HARD CONFLICT WITH HIS PRIDE. But a SINNER must be willing to do ANYTHING FOR CHRIST.”

Prior to the Christianization of the Kanaka Maoli people, relationships deemed homosexual, bisexual, and poly by the Eurocentric societies were normative among *ali'i* (chiefly) and *maka'āinana* (commoner) members of society. While the Western world would not fully realize these terms and their discourses until the 18th and 19th centuries, Kanaka Maoli had already developed and practiced complex systems of intimacy and relation hundreds of years before European contact. Words like *punalua* and *po'olua*, which incorporates the possibility of polyamorous relationships; *aikāne*, which recognizes same-sex intimacy; and *māhū* which honors the interplay between female and male energies in one being, speak to these histories of relation and sexuality that nestles into an ancient oceanic *mo'okū'auhau* (genealogy). All of these relationships and modes of being were integral to the Kanaka Maoli family system, a system that did not revolve around the nuclear family. Instead, this system worked generationally from *kūpuna* (elders), *mākua* (parents, aunts, uncles), to *'ōpio/keiki* (young adults, teens, and children). All family members within their respective generation were referred to by their generational marker—making an aunt or uncle a *makua* and a cousin a *hānau mua* or *hānau hope* (older and younger sibling). Under this system of kinship, these relations and modes of being (now queered) in Kanaka Maoli society were uncontested.[1]





With the collapse of the Hawaiian family through the supplanting of generational kinship ties for the nuclear family, māhū and "othered" modes of intimate relationality referenced above were cast into liminal social and legal positions. With the advent of the Gay Rights movements of the 20th and 21st centuries, Western discourses on sexuality and gender took precedence in the ever-growing conversation on equality. The word "queer" itself was reclaimed as a marker for the project of equality with the aim of uniting all of Western society's queered subjects into the realm of Eurocentric normativity and settler sexual citizenship.

However, Indigenous peoples were already queered as peoples living outside the norms of European settler normativity. The equality spoken of in queer politics does not equate to Indigenous liberation, as movements toward Indigenous liberation refuse to operate through the same genealogies of thought that erases indigeneity.[2]

Because Indigenous Pasifika relations developed separately from Western discourses on sexuality, these stories, histories, and complexities are often misunderstood if not ignored completely. Indigenous sexual and gender relations and identities are stuffed into boxes of normative possibilities privileging Eurocentric histories of sexuality over queered Kanaka Maoli experiences and modes of being. For example, the term māhū is equated to transgender, aikāne is touted as homosexual, punalua and po'olua are decontextualized as polygyny and polyandry respectively. Thus, the contextual threads of *pilina* (relation/kinship) and kuleana that bind all these intimate structures of belonging are flattened through the moving tides of global sexual citizenship. Honoring and caring for māhū and any other *pilina Pasifika* (pacific relation) would demand a closer critical look at the normative privileges many enjoy today in Indigenous homelands.

1 Kēhaulani Kauanui, "Savage' Sexualities," *Paradoxes of Hawaiian Sovereignty: Land, Sex, and Colonial Politics of State Nationalism*, (Duke University Press: Durham, 2018).

2 Stephanie Nohelani Teves, *Defiant Indigeneity: The Politics of Hawaiian Performance* (The University of North Carolina Press: Chapel Hill, 2018), 155.



Further, while māhū, aikāne, punalua, and po'olua may not seamlessly translate to transgender, homosexual, polyandry, and polygyny, those who identify with their queered Indigenous identities may also identify with modes of being developed by the Western societies. Via the proximity to continued colonial dispossession and imposition, Kanaka Maoli and Pasifika peoples constantly interact with global forces and attitudes of exclusion and inclusion. Indigenous queered realities do not claim that the global and local are mutually exclusive. However, the sway of global perspectives on queered relations can often flatten the complexity and difference of Kanaka Maoli/Pasifika experiences. These critical distinctions and historical contexts must be considered when caring for these communities. Otherwise, care providers risk reproducing the violence of erasure through poorly contrived efforts at inclusive care practices. Not all LGBTQIA+ spaces are safe spaces for queered indigenous relations, modes of being, and peoples.

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### • Where's the data?

Despite the ongoing toll of COVID-19 across the world, there is limited data on the impact of the COVID-19 pandemic on sexual and gender minority (SGM) people, especially in the United States and Hawai'i. Most research focuses on LGBT communities, with scarce data on related but distinct cultural identities like māhū. Centering the cultural identities of these communities is paramount to the accuracy of the data. Although local SGM communities have diverse cultural and historical contexts, some initial research from the U.S. may be helpful for Hawai'i. Below are some findings on COVID-19's disparate affects on the lives of LGBT people in the United States from the [Kaiser Family Foundation \(KFF\)](#) (December 2020-January 2021) and the Centers for Disease Control and Prevention (CDC).





- **Underlying Risk Already Present**

In a [2021 CDC report](#), researchers found that LGB adults in the U.S. were more likely than their heterosexual counterparts to have pre-existing conditions—such as asthma, cancer, heart disease, and others—that would increase their risk for serious COVID-19 illness. However, the report also noted that U.S. COVID-19 surveillance systems routinely lack SGM data collection, so true health disparities were difficult to determine.

- **Job Losses Were Higher**

According to KFF, compared to households without LGBT adults, LGBT households have experienced higher rates of job loss during the COVID-pandemic. Over half of LGBT households reported such job loss, which may partially be accounted for by more LGBT employees in industries most affected by COVID-19, such as restaurants, food service, and performance arts.

- **Mental Health Issues Increased**

According to [local data](#), LGB and questioning people in Hawai'i are more likely than their straight counterparts to have mental health issues. During the COVID-19 pandemic, these issues were exacerbated, with almost 3 out of 4 LGBT people reporting to KFF that “worry and stress from the pandemic has had a negative impact on their mental health”, often in a major way.


- **Vaccine Uptake to Protect Community**

The KFF survey report found that both LGBT and non-LGBT people reported the same rate of wanting to get the first COVID-19 vaccine dose. However, a higher percentage of LGBT adults (75%) reported their motivation for vaccination as a “responsibility to protect the health of others”, as compared to non-LGBT adults (48%).

In 2022, the [CDC reported](#) that “COVID-19 vaccination coverage and vaccine confidence were higher among gay or lesbian adults than among heterosexual adults.” Notably, similar findings did not exist when comparing people based on gender identity, which speaks to the importance of disaggregating data for sexual orientation and gender identity, especially in respect to COVID-19.

- **Future Needs for Local Impact**

As more data emerges, the health and economic disparities among SGM people in the United States are becoming clearer. If these trends are similar for local communities, it is important that resources and research are dedicated to identifying and addressing the specific, unique, and diverse needs of SGM people in Hawai'i.





**PONO (DOs)**

**HEWA (DON'Ts)**

Do ask what LGBTQIA+/Māhū people's pronouns are

Do not assume pronouns based on appearance

Do ask if the patient would prefer a specific doctor that they would feel comfortable with

Do not assume or deny requests

Do ask if they would like a support person or another professional present in the room

Do not deny request or assume LGBTQIA+/Māhū, folk want to see a specialist

Do ask who they brought with them and ask if they would prefer to have that person to stay for the entire appointment

Do not assume you know the relationship of who they have accompanying them. Also don't assume that they would feel comfortable with having them there the entire time

Do ask what brings them in and if there are any updates to their health chart

Do not assume you know what the patient is there

Do ask if they have any questions about the COVID-19 vaccines and offer answers

Do not deny answers or assume that patients have prior knowledge/access to the knowledge surrounding COVID-19

Do offer visual displays of health brochures and signage surrounding LGBTQIA+/Māhū health concerns

Do not only offer health brochures and signage for cisgendered patients. Everyone deserves access to information about their own health related topics

Do ensure all your intake forms and documents include inclusive language for all patients such as asking for sex assigned at birth, chosen name, name on health insurance, and pronouns

Do not use outdated language on forms



# Style Guides for Writing

Alex Kapitan is a radical copyeditor who provides in-depth style guides to on writing about sexual and gender minorities.

*"The concept of radical copyediting is based on the fact that language is not neutral. Through language we communicate values, maintain norms, and dictate what's possible. Words matter: they can be used to harm or to heal; to perpetuate prejudice or imagine a different world; to oppress or to liberate.*

*Copyeditors help authors and publishers ensure that their work is clear, consistent, and understandable, using grammar rules, dictionaries, style manuals, and other tools. A radical copyeditor does all that and also helps people align their words with their values, bringing forward awareness and sensitivity in terms of how norms around race, class, ability, gender, sexuality, age, and more show up in language.*

*Radical copyediting helps language live up to its most radical potential—serving the ends of access, inclusion, and liberation, rather than maintaining oppression and the status quo."*

[Copyediting for writing about QUEER PEOPLE](#)

[Copyediting for writing about TRANSGENDER PEOPLE](#)

# Where is it safe to go?



In March 2022, the members of the Hawai'i SGM Workgroup released the third edition of the Hawai'i SGM Services Directory.

This is an opt-in directory of organizations and individuals (including but not limited to the healthcare sector) providing identity-affirming services for sexual and gender minorities. As more service providers share information, the directory will be updated over time.

For more local resources, go to the SGM Resources Hub.



PLEASE SHARE WITH YOUR  
COMMUNITY, DOCTORS, NURSES,  
'OHANA, & CHOSEN 'OHANA

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# MAHALO NUI LOA

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